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**DECLARATION FOR UTILITY OR  
DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing  
OR  
☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number 960296.99047

First Named Inventor David C. Schwartz

**COMPLETE IF KNOWN**

Application Number 10/713,898

Filing Date October 18, 2002

Art Unit ---

Examiner Name ---

**I hereby declare that:**

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

MICRO FLUIDIC SYSTEM FOR SINGLE MOLECULE IMAGING

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY) 10/18/2002

as United States Application Number or PCT International

Application Number 10/713,898 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

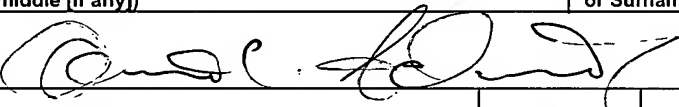
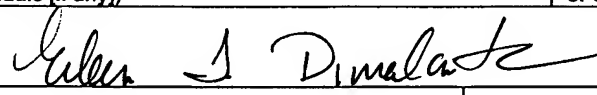
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

## DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number <span style="border: 1px solid black; padding: 2px;">27114</span> OR <input type="checkbox"/> Correspondence address below			
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<small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small>			
NAME OF SOLE OR FIRST INVENTOR :		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <span style="float: right;">David C.</span> <small>(first and middle (if any))</small>		Family Name <span style="float: right;">Schwartz</span> <small>or Surname</small>	
Inventor's Signature 		Date <span style="float: right;">Feb 6. 25, 2004</span>	
Residence: City <span style="float: right;">Madison</span>	State <span style="float: right;">WI</span>	Country <span style="float: right;">USA</span>	Citizenship <span style="float: right;">USA</span>
Mailing Address <span style="float: right;">3110 Oxford Road</span>			
Mailing Address			
City <span style="float: right;">Madison</span>	State <span style="float: right;">WI</span>	ZIP <span style="float: right;">53705</span>	Country <span style="float: right;">USA</span>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name <span style="float: right;">Eileen T.</span> <small>(first and middle (if any))</small>		Family Name <span style="float: right;">Dimalanta</span> <small>or Surname</small>	
Inventor's Signature 		Date <span style="float: right;">02.25.04 <sup>ED</sup></span>	
Residence: City <span style="float: right;">Madison</span>	State <span style="float: right;">WI</span>	Country <span style="float: right;">USA</span>	Citizenship <span style="float: right;">USA</span>
Mailing Address <span style="float: right;"><del>1323 Spring Street #2</del> 301 Eagle Heights Apt E <sup>ED</sup></span>			
Mailing Address <span style="float: right;"><sup>ED</sup></span>			
City <span style="float: right;">Madison</span>	State <span style="float: right;">WI</span>	ZIP <span style="float: right;"><del>53706</del> 53705</span>	Country <span style="float: right;">USA</span>
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.			

Please type a plus sign (+) inside this box → ☐

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<b>DECLARATION</b>	<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet Page <u>3</u> of <u>3</u>
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<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Juan J.		de Pablo	
Inventor's Signature <i>Juan J de Pablo</i>		Date	
Residence: City	Madison	State	WI
Country	USA	Citizenship	USA
Mailing Address 2514 Chamberlain Avenue			
Mailing Address			
City	Madison	State	WI
ZIP	53705	Country	USA
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	
<b>Name of Additional Joint Inventor, if any:</b>		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any])		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
ZIP		Country	